



**ENVIRONMENTAL AND PUBLIC PROTECTION CABINET  
DEPARTMENT OF HOUSING, BUILDINGS AND CONSTRUCTION**

**PLAN SUBMISSION APPLICATION GUIDE  
FOR  
BUILDING CONSTRUCTION**

**DIVISION OF BUILDING CODE ENFORCEMENT  
502-573-0373**

**101 Sea Hero Road Suite 100  
Frankfort, Kentucky 40601-5405**

**[www.dhbc.ky.gov](http://www.dhbc.ky.gov)**



**THE MAJOR PURPOSE OF THIS APPLICATION GUIDE IS TO PROVIDE INFORMATION AND EXPEDITE THE  
OVERALL PLAN REVIEW PROCESS**

We realize that the procedures described herein will not be suitable for every project.  
IF A SPECIAL PROBLEM OCCURS, THIS DEPARTMENT IS AVAILABLE TO ASSIST YOU.

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**NOTE: IF YOU ARE PLANNING TO VISIT YOUR LOCAL BUILDING INSPECTOR, PLUMBING INSPECTOR, HEALTH DEPARTMENT OR OUR OFFICE IN FRANKFORT, PLEASE CALL FOR AN APPOINTMENT FIRST. THIS WILL ENABLE US TO SERVE YOU MORE EFFICIENTLY. SEE PHONE NUMBERS ON PAGE 18.**

## PREFACE

This guide had been developed over the years to answer most general questions that arise regarding the process of obtaining building or plumbing permits. If this guide does not fully answer your questions or if you have more specific questions, please feel free to call the Division of Building Code Enforcement at (502) 573-0373 or Division of Plumbing at (502) 573-0397.

**FIRST STEP:** When planning a new construction project for Kentucky please contact the local planning/zoning authority to ensure the proposed construction site is properly zoned. In many cases, substantial delays can be experienced if rezoning or zoning appeals are necessary. The Department of Housing, Buildings & Construction has no authority over local planning/zoning commissions. Call the city or county government to determine if there are local zoning requirements.

**SECOND STEP:** Determine if the state or local Building Department has building code enforcement responsibility. Kentucky is unique in that code enforcement responsibilities are divided between state and local jurisdictions with virtually no duplication of code enforcement activities.

Basically, local building code programs review the smaller construction projects and the state reviews the larger ones. Section 104.0 of the 2007 KBC identifies building code enforcement responsibilities. Please refer to Page 17 of the "Guide" to determine who will review your project. Local jurisdictions may petition the DHBC for additional responsibilities beyond the minimum assigned by law. A listing of those local jurisdictions currently having additional responsibilities can be found on our web-site, [www.dhbc.ky.gov](http://www.dhbc.ky.gov) or obtained by phoning our office at 502-573-0373.

There are still several city and county governments that do not have Building Code Enforcement programs. In these areas, the Department is responsible for all buildings other than single family dwellings. Page 17 of this Guide describes the types of projects to be reviewed locally or by this Department. If you are unaware of a local code enforcement program, call this office to confirm.

After determining whether the Department or the local code official has jurisdiction, the **Third/Final step** is to make initial contact with the appropriate code enforcement agency to determine the process for obtaining a building construction permit. Each local agency determines its own permit process and they may vary across the state. The Department has developed this detailed Plan Submission Application Guide to answer most general questions regarding who, what, when, where and how of obtaining a building construction permit for those project under the jurisdiction of the Department. More specific questions can be directed to one of several plan review technicians located in the Division of Plumbing or Division of Building Code Enforcement.

### Plan Submission Process for the Department of Housing, Buildings & Construction

## SUBMITTING TO DIVISOIN OF BUILDING CODES ENFORCEMENT

SEND: One (1) complete of architectural plans  
One (1) set of specifications if available  
One (1) application form completed in full by identifying the name and address of the building (or tenant business name), owner, architect, engineer, contractor. If the project is within a larger multi-tenant building, **also identify the name of the building, i.e Joe's Bar-B-Q House @ Southbay Shopping Center.**

If further information is needed, contact:  
Division of Building Codes Enforcement  
101 Sea Hero Road. Suite 100  
Frankfort Kentucky 40601-5405  
(502) 573-0373

### PROCEDURE FOR SUBMITTING CORRECTED ARCHITECTURAL PLANS

One (1) Set of Architectural Plans and cover letter identifying project by Name and Case Number shall be submitted to the attention of the Plan Reviewer.

# Plumbing Plan Submission

All plumbing plans for commercial and multi-family building projects must be pre-approved by the Division of Plumbing before a plumbing permit can be issued.

## Submittal Requirements

Three (3) completed Plan Application Forms

Three (3) sets of plans containing a site utility plan, all floor plans, plumbing isometric riser diagram of the drain, waste & venting system and 4 sets of plans for pool submittals

Jefferson County will require a minimum of five (5) sets of plans.

**\*\*ANY FOOD SERVICE REQUIRES ONE ADDITIONAL PLUMBING PLAN TO BE INCLUDED**

All Plumbing plans shall first be submitted directly to the county Health Departments for approval in the following counties.

|                   |                  |                   |                   |
|-------------------|------------------|-------------------|-------------------|
| <b>Adair</b>      | <b>Fayette</b>   | <b>Leslie</b>     | <b>Robertson</b>  |
| <b>Anderson</b>   | <b>Fleming</b>   | <b>Letcher</b>    | <b>Rockcastle</b> |
| <b>Ballard</b>    | <b>Franklin</b>  | <b>Livingston</b> | <b>Russell</b>    |
| <b>Barren</b>     | <b>Fulton</b>    | <b>Logan</b>      | <b>Scott</b>      |
| <b>Bell</b>       | <b>Floyd</b>     | <b>Lyon</b>       | <b>Shelby</b>     |
| <b>Bourbon</b>    | <b>Garrard</b>   | <b>McCracken</b>  | <b>Simpson</b>    |
| <b>Boyd</b>       | <b>Graves</b>    | <b>McCreary</b>   | <b>Spencer</b>    |
| <b>Breathitt</b>  | <b>Green</b>     | <b>Madison</b>    | <b>Taylor</b>     |
| <b>Butler</b>     | <b>Harlan</b>    | <b>Magoffin</b>   | <b>Trigg</b>      |
| <b>Caldwell</b>   | <b>Harrison</b>  | <b>Marshall</b>   | <b>Trimble</b>    |
| <b>Calloway</b>   | <b>Hart</b>      | <b>Mason</b>      | <b>Warren</b>     |
| <b>Carlisle</b>   | <b>Henry</b>     | <b>Mercer</b>     | <b>Wayne</b>      |
| <b>Carroll</b>    | <b>Hickman</b>   | <b>Metcalfe</b>   | <b>Whitley</b>    |
| <b>Casey</b>      | <b>Jackson</b>   | <b>Montgomery</b> | <b>Wolfe</b>      |
| <b>Clark</b>      | <b>Jefferson</b> | <b>Muhlenberg</b> | <b>Woodford</b>   |
| <b>Clay</b>       | <b>Jessamine</b> | <b>Nelson</b>     |                   |
| <b>Clinton</b>    | <b>Knott</b>     | <b>Nicholas</b>   |                   |
| <b>Crittenden</b> | <b>Knox</b>      | <b>Owsley</b>     |                   |
| <b>Cumberland</b> | <b>Lawrence</b>  | <b>Perry</b>      |                   |
| <b>Edmonson</b>   | <b>Lee</b>       | <b>Pulaski</b>    |                   |

All plans must be submitted to local Health Department if your project has any of the following:

|                        |                        |                            |                              |                          |
|------------------------|------------------------|----------------------------|------------------------------|--------------------------|
| <b>Food Processing</b> | <b>Boarding Homes</b>  | <b>Bed &amp; Breakfast</b> | <b>Correctional Facility</b> | <b>Tanning Beds</b>      |
| <b>Grocery</b>         | <b>Day Cares</b>       | <b>Food Service</b>        | <b>Hotels / Motel</b>        | <b>Pools</b>             |
| <b>Restaurant</b>      | <b>Youth Camps</b>     | <b>Tattoo Shops</b>        | <b>Beaches</b>               | <b>Concessions</b>       |
| <b>Caterer</b>         | <b>Micro-Processor</b> | <b>Schools</b>             | <b>Mobile Food Unit</b>      | <b>Food Vending</b>      |
| <b>Private Water /</b> | <b>Food Storage</b>    | <b>Frozen Food</b>         | <b>Mobile Home Parks</b>     | <b>Mobile Home &amp;</b> |
| <b>Sewage Disposal</b> | <b>Facility</b>        | <b>Lockers</b>             |                              | <b>RV Parks</b>          |

The following cities require prior approval of the sewer system:

**Louisville – Elizabethtown**

After the above requirements are completed submit plans to:

**Division of Plumbing**  
**Department of Housing, Building & Construction**  
**101 Sea Hero Road, Ste. 100**  
**Frankfort, Kentucky 40601-5405**

Please call Tim House or Dennis Rodgers at 502-573-0397 if you have questions regarding your plumbing plan submittal.

Office hours are 8:00 am until 4:30 pm EST.

**THE FOLLOWING IS A COMPREHENSIVE LIST OF THE DOCUMENTATION REQUIRED TO BE SUBMITTED FOR A COMPLETE PLAN REVIEW:**

### **BUILDING PLAN REVIEW CHECKLIST**

- 1) A title block which includes:
  - Type of Construction ( Chapter 6 KBC)
  - Use Group ( Chapter 3 KBC)
  - List all installed fire protection systems
  - List all design options
- 2) Site Plan & Site Survey (106.2, KBC)
- 3) Complete building plans showing use of all areas
- 4) All appropriate wall, floor and foundation section details
- 5) Complete door schedule including hardware schedule
- 6) Complete window and glazing schedule
- 7) Complete interior finish schedule with documentation of maximum flame spread ratings
- 8) Complete Specifications ( MAY BE SEPARATE DOCUMENT OR LOCATED IN THE PLANS)
- 9) List of all fire rated assemblies and documentation of the required rating.
- 10) Details showing all accessibility features ( See Page 8)
- 11) Floor plan showing location of aisles, storage systems, industrial equipment etc., where applicable
- 12) Statement indicating shop drawing will be submitted for all fire protection systems
- 13) Fire Suppression Design Criteria ( See Page 15 & 16 of Application Guide)
- 14) Electrical Plans ( Show location of all exits and means of egress lighting)
- 15) List all design loads for the building
- 16) Complete information for all special occupancy requirements (Atrium, high rise and covered mall)
- 17) Complete information for all special structures ( sky lights, roof, panels, awnings, etc.)
- 18) Earthquake Design Data (Section 1603.1.5) and letter of special inspections, where applicable, by Section 1613 thru 1623 and 1704 of the building code. ( See Page 8)
- 19) Signed and Sealed plans ( when required by KRS 322/323)
- 20) Sequence of operations for all special systems (smoke control, elevator recall, etc.)

**IF YOUR PROJECT FALLS UNDER LOCAL JURISDICTION, YOU WILL HAVE TO CHECK WITH THE LOCAL AUTHORITY TO FIND OUT HOW MANY SETS OF PLANS AND SPECIFICATIONS ARE REQUIRED.**

## PLAN REQUIREMENTS

- 1) **GENERAL:**  
Submit one (1) complete set of plans and three (3) plumbing sets of plans that have been prepared by an individual or design professional for the construction, alteration, or repair of a structure.  
(See Page #7 for Architects' and Engineers' requirements.) Make sure they are legible and complete for ensuring compliance with the regulations. Review the plans for compliance with the Kentucky Building Code. Plans containing the following information shall be considered meeting the requirements for plan submittals. (See Page# 3 and #4 for submission procedures.)
- 2) **ARCHITECTS AND ENGINEERS REQUIREMENTS: See page # 7**
- 3) **REQUIREMENTS FOR THE PHYSICALLY DISABLED: See Page # 8**
- 4) **CODES CURRENTLY USED IN THE STATE: See Page # 21**
- 5) **ARCHITECTURAL PLANS:**
  - (a) **SITE SURVEY:**  
Copy of site survey bearing signature and seal of a Kentucky Registered Land Surveyor for new buildings and additions.
  - (B) **SITE DIAGRAM:**  
A site plan indicating the size and location of all new and existing construction on the site and distances from these buildings to lot lines. Indicate new building services, utilities, location, size and finished grades.
  - (C) **CONSTRUCTION PLANS:**  
Scale drawings showing foundation, floor plans and elevations, including structural framing details and notes for all walls, floors ceilings and roofs. Electrical, plumbing and mechanical details may be shown on more than one drawing.
  - (d) **DETAILS:**
    - (1) Section: A cross section through one typical wall showing construction details from footing to and including roof framing. It must demonstrate compliance with the Kentucky Building Code.
    - (2) Electrical Details: Indicating lighting, receptacles, motors and equipment, smoke detectors, service entrance locations (size and type overhead or underground), panel size, location and number of proposed circuits. A symbol legend shall be included.
    - (3) Plumbing Details: Plans indicating number, type and location of fixtures, type of sewage disposal system, details of disposal system (connection to domestic or septic system layout). Piping layout and riser diagrams shall be included.
- 6) **ENERGY CONSERVATION CALCULATIONS:**  
  
Forms for the necessary calculations are available on request from Frankfort or Com Check at [www.energycodes.gov](http://www.energycodes.gov).
- 7) **SEISMIC DESIGN DATA & LETTER OF SPECIAL INSPECTIONS: (See Page# 8)**
- (8) **FIRE SUPPRESSION DESIGN CRITERIA:**  
(See Pages 15 and 16)
- (9) **PLAN APPLICATION OR APPLICATION FORM:**  
One (1) copy of this sheet must be completed and attached to each set of drawings. (See Pages 11 and 12)
- (10) **PLAN REVIEW FEE:**  
This department must require a plan review fee to cover plan review and field inspection services provided by the Office of Housing, Buildings and Construction. The local building departments may also have a permit fee and it is recommended to check prior to submission. The fee must accompany the plans in the initial submission. Fees will also be required for shop drawings (See '13' below) and should be submitted with their respective drawings. TO CALCULATE THE FEE SEE PAGES 13 and 14.
- (11) **AFFIDAVIT OF ASSURANCES:**  
One (1) copy of this form must be completed and submitted with drawings. (See Page 22)
- (12) **PLUMBING SUBMISSION:**  
When submitting plans that relate only to plumbing, the plan set is only required to have the following:
  - (a) Site plan indicating underground piping and disposal method.
  - (b) Floor plan showing layout of all fixtures. (See (3) & (5C) above)
  - (c) Plumbing riser diagram.
  - (d) Compliance with handicapped requirements, if applicable. (See Page 8)
  - (e) Specification book, if required.
- (13) **SHOP DRAWINGS:**  
The following, when required, must be submitted by a registered engineer or a competent installing contractor, or licensed contractor.
  - (a) Fire Alarm System
  - (b) Fire Suppression System (Sprinkler, CO<sup>2</sup>, Halon, Standpipe)
  - (c) Fuel Installation- to Hazardous Materials Section, State Fire Marshal's Office (Gasoline, LP, Fuel Oil Tanks, etc.)
  - (d) Range Hood/Exhaust system
  - (e) Range Hood Extinguishing Systems
  - (f) Boilers- to Boiler Section, State Fire Marshal's Office
  - (g) Pools

Plans above shall be complete and include all specifications.

If these plans are to be reviewed at the time of the initial plan submittal, the plans shall be complete with all details including size, make, manufacture, anchors, hangers, covering, along with the required fee (Page 14) and a written request to review these plans.
- (14) **ELECTRICAL INSPECTION:**  
  
Before permanent electrical service can be provided and legal occupancy is issued on a building, the wiring must be approved by a state certified electrical inspector. A fee is required by the inspector. For further information about obtaining an electrical inspector, contact your local building official, or the Electrical Division at (502) 573-0373

# PROFESSIONAL DESIGN REQUIREMENTS

(SEE KRS 322 & 323 FOR COMPLETE REQUIREMENTS OR SECTION 122.1 OF THE 2007 CODE)

THE FOLLOWING USES OF NEW STRUCTURES, ADDITIONS OR RENOVATIONS WILL REQUIRE THE SERVICES OF EITHER AN ARCHITECT OR AN ENGINEER LICENSED IN KENTUCKY:

**TABLE 122.1  
DESIGN PROFESSIONAL SEALS**

NOTE: Projects involving new structures, additions or renovations require design professional services when the building size or calculated occupant load exceeds the limits indicated by Table 122.1.

| GROUP<br>CLASSIFICATION OR<br>SPECIAL USE | BUILDING SIZE <sup>e</sup><br>(square feet) | CALCULATED<br>OCCUPANT LOAD <sup>e</sup> | ARCHITECT | ENGINEER | EITHER | NONE |
|---|---|--|-----------|----------|--------|------|
| Assembly                                  | —   | 100 <sup>a</sup>                         | X         | X        | —      | —    |
| Business                                  | 10,000                                      | 100                                      | X         | X        | —      | —    |
| Educational                               | Any size                                    | Any size                                 | X         | X        | —      | —    |
| Factory & industrial                      | 20,000                                      | —  | —         | —        | X      | —    |
| High hazard                               | Any size                                    | Any size                                 | —         | —        | x      | —    |
| Institutional                             | Any size                                    | Any size                                 | X         | x        | —      | —    |
| Mercantile                                | —   | 100                                      | X         | X        | —      | —    |
| Residential                               | 12 dwelling units <sup>g</sup>              | 50 <sup>g</sup>                          | X         | X        | —      | —    |
| Storage <sup>e</sup>                      | 20,000                                      | —  | —         | —        | X      | —    |
| <b>Special Uses</b>                       |   |  |           |          |        |      |
| Church buildings <sup>f</sup>             | 6,000                                       | 400                                      | X         | X        | —      | —    |
| Day care                                  | 3,500 <sup>b</sup>                          | 100 <sup>b</sup>                         | X         | X        | —      | —    |
| Farm Structures                           | Any size                                    | Any size                                 | —         | —        | —      | x    |
| Mixed uses                                | Note c                                      | Note c                                   | X         | X        | —      | x    |
| Smaller buildings                         | Note d                                      | Note d                                   | —         | —        | —      | x    |
| Nonbuilding structures                    | —   | —  | —         | —        | —      | x    |

\*The occupant load shall be calculated using the different occupiable area within the structure to determine the requirement for an architect and engineer. To determine the calculated occupant load, please see the T1004.1.1 (below)

**TABLE 10041.1, 2007 KBC - MAXIMUM FLOOR AREA ALLOWANCES PER OCCUPANT <sup>a</sup>**

| OCCUPANCY   | FLOOR AREA IN SQ. FT. PER OCCUPANT |
|---|------------------------------------|
| Agricultural building   | 300 gross                          |
| Aircraft hangars  | 500 gross                          |
| Airport terminal  |                                    |
| Baggage claim   | 20 gross                           |
| Baggage handling  | 300 gross                          |
| Concourse   | 100 gross                          |
| Waiting areas   | 15 gross                           |
| Assembly  |                                    |
| Gaming floors (keno, slots, etc.)   | 11 gross                           |
| Assembly with fixed seats   | See Section 1004.7                 |
| Assembly without fixed seats  |                                    |
| Concentrated (chairs only ---- not fixed)   | 7 net                              |
| Standing space  | 5 net                              |
| Unconcentrated (tables and chairs)  | 15 net                             |
| Bowling centers, allow 5 persons for each lane including 15 feet of runway, and for additional areas            | 7 net                              |
| Business areas  | 100 gross                          |
| Courtrooms ---- other than fixed seating areas  | 40 net                             |
| Dormitories   | 50 gross                           |
| Educational   |                                    |
| Classroom area  | 20 net                             |
| Shops and other vocational room areas   | 50 net                             |
| Exercise rooms  | 50 gross                           |
| H-5 Fabrication and manufacturing areas   | 200 gross                          |
| Industrial areas <sup>h</sup> (use 200 gross for determining jurisdiction and design professional requirements) | 100 gross                          |
| Institutional areas   |                                    |
| Inpatient treatment areas   | 240 gross                          |
| Outpatient areas  | 100 gross                          |
| Sleeping areas  | 120 gross                          |
| Kitchens, commercial  | 200 gross                          |
| Library   |                                    |
| Reading rooms   | 50 net                             |
| Stack area  | 100 gross                          |
| Locker rooms  | 50 gross                           |
| Mercantile  |                                    |
| Areas on other floors   | 60 gross                           |
| Basements and grade floor areas   | 30 gross                           |
| Storage, stock and shipping areas   | 300 gross                          |
| Parking garages   | 200 gross                          |
| Residential   | 200 gross                          |
| Skating rinks, swimming pools   |                                    |
| Rinks and pools   | 50 gross                           |
| Decks   | 15 gross                           |
| Stages and platforms  | 15 net                             |
| Accessory storage areas, mechanical equipment room  | 300 gross                          |
| Warehouses  | 500 gross                          |

## **ACCESSIBILITY REQUIREMENTS FOR PHYSICALLY DISABLED**

All new buildings and facilities, including temporary structures, their associated sites and facilities, shall be accessible to persons with disabilities, including, but not limited to OCCUPANTS, EMPLOYEES, STUDENTS, SPECTATORS, PARTICIPANTS, AND VISITORS. [1103.1 IBC] REVIEW SECTION 1103.2 of the IBC and KBC FOR EXCEPTIONS.

When work involves alterations, additions, change of occupancy or alterations affecting an area of primary function, please review Section 3409 of the IBC.

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## **STRUCTURAL LOADS**

1603.1.5 Earthquake Design Data: Where *earthquake loads* are applicable, the following earthquake design data shall be indicated on the *construction documents*:

1. Seismic use group.
2. Spectral response coefficients  $S_{DS}$  and  $S_{D1}$ .
3. Site Class
4. Basic seismic-force-resisting system.
5. Design base shear
6. Analysis procedure

## **STRUCTURAL TEST AND INSPECTIONS**

### **SPECIAL INSPECTIONS**

The *special inspections* required by Sections 1704. The special inspectors shall be provided by the owner and shall be qualified and approved for the inspection of the work described herein.

#### **EXCEPTIONS:**

1. Special inspections are not required for work for which a design professional is not required by Section 122.1. (refer to page # 7)
2. Special inspections are not required for building components unless the design involves the practice of professional engineering or architecture as defined by applicable state statutes and regulations governing the professional registration and certification of engineers or architects.
3. Unless otherwise required by the building official, special inspections are not required for occupancies in Group R-3 as applicable in Section 101.2 and occupancies in Group U that are accessory to a residential occupancy including, but not limited to, those listed in Section 312.1.
4. Unless otherwise required by the building official, special inspections are not required for buildings assigned to Category I per Table 1604.5.

1704.1.1 Building Permit Requirement: The permit applicant shall submit a Statement of *Special Inspections* as a condition for permit issuance. This statement shall include a complete list of materials and work requiring *special inspection* by this section. The inspections to be performed and a list of the individuals, approved agencies and firms intended to be retained for conducting such inspections.



# **PARTIAL PERMITS**

The Building Code Official is authorized to issue a permit for any part of a building or structure before the plan complete package has been submitted. Upon request, the Building Code Official is also authorized to issue partial permits if an entire plan package has been filed but falls short of meeting the requirements for full permit.

The issuance of a partial permit is contingent upon adequate information and details having been filed to demonstrate compliance with all pertinent requirements of the Code.

## **SITE / FOUNDATION**

The following items are required before a Site and Foundation Permit is to be issued. Not all items will be applicable on each project. All drawings shall be dimensioned and drawn to scale.

❑ **ARCHITECT/ENGINEER**

The services of an Architect or Engineer shall be confirmed. When their services are required, the plans shall bear the seal and signature of the Architect and /or Engineer (KRS 322/323 and Table 122.1 of the KBC)

❑ **SITE PLAN**

A site plan showing the location of the building and its distance to property lines and other buildings on the same property and finished grades shall be submitted. (Section 106.2 KBC)

❑ **SITE SURVEY**

A plan illustrating the location of property lines and bearing the seal and signature of a land surveyor shall be submitted. (Section 106.2 KBC)

❑ **NOTICE:**

Information for the installation of underground sprinkler supply lines shown on the site plan is not covered under a site and foundation permit. A separate letter of approval or disapproval shall be required for this work. This work shall be performed by a Kentucky licensed sprinkler contractor. (refer to Krs 198B.560)

❑ **FOUNDATION PLAN**

A foundation plan and details shall be submitted, including anchorage details. This includes final anchor bolt plans from pre-engineered metal buildings,

❑ **FLOOR PLANS**

A floor plan of the building with sufficient information to identify all areas and the Use Group shall be submitted. (Chapter 3, KBC)

❑ **Seismic Design Data & Letter of Special Inspection (Sections 1603.1.5 and 1704)**

❑ **CONSTRUCTION TYPE**

Sufficient construction details (i.e. exterior walls, interior bearing structure and floor/roof assembly) shall be submitted to confirm the building will comply with the minimum construction required. (Chapters 5 and 6 KBC)

❑ **FIRE WALLS**

If a fire wall is provided, the location of this wall shall be identified on the foundation and floor plans. A full height section through the wall shall be submitted.

FIRE WALL- A wall designed with a noncombustible material, specified fire rating and structurally independent to allow collapse of construction on either side without causing collapse of the wall itself. A fire wall shall be continuous from footer to or through roof. (Section 705. KBC)

❑ **SUPPRESSION SYSTEM**

Fire suppression design criteria shall be submitted when the project requires a sprinkler system involving more than 10 sprinklers. This applies to limited area systems as well as full coverage systems. (Section 903.2 and 302.1.1, KBC)

❑ **ADDITIONS**

If the proposed structure is an addition to an existing structure, information confirming the following shall be submitted for the existing building: (Section 3403 KBC)

- a) Construction Type;
- b) Fire wall location, construction and fire rating;
- c) Building Area
- d) Number Stories
- e) Use group Classification: and
- f) Type suppression system (Full coverage of limited area).

❑ **FEE**

The architectural plan review fee shall be paid in full before any release for construction can be issued. (Section 121 KBC)

❑ **FAST TRACK ELECTIVE**

For applicants seeking a quicker footing and foundation review only. The drawings and documents identified above submitted by close of business any Wednesday, for a S/F review the following Friday afternoon. Fee shall be calculated from Table 121.3.1 **plus** an additional 50% of the full fee. Additional fee shall not be less than \$400 and not more than \$3000.

# **SHELL**

The following items are required before a Shell permit is to be issued. Not all items will be applicable on each project. All drawings shall be dimensioned and drawn to scale.

## **THE FOLLOWING ITEMS FROM SITE AND FOUNDATION PERMIT LIST**

Architect/Engineer  
Additions

Suppression System  
Site Survey  
Foundation Plan

Site Plan  
Site Survey  
Fee

### **FOOR PLAN(S)**

A floor plan illustrating location of interior partitions, means of egress, exit access, exit, and exit discharge and identification of rooms shall be submitted.

### **DOOR SCHEDULE**

This schedule shall identify door size, hardware and fire ratings.

### **STRUCTURAL PLANS**

All drawings pertinent to the erection of the buildings' structural system shall be submitted. These drawings shall consist of, but are not limited to, exterior/interior load bearing walls, floor/ceiling assemblies, roof structure and all pre-engineered /prefabricated systems (steel building, wood floor/roof trusses, laminated systems, and pole barn, and post and frame designs etc.)

### **EXTERIOR WALLS**

A complete set of construction details illustrating method and materials for the construction of all exterior walls.

### **FIRE WALLS**

If a firewall is provided or required, the floor plan shall identify the location. A full height section (drawn to scale) shall be submitted illustrating the method and materials for construction. (Section 705, KBC)

### **FIRE BARRIER/FIRE PARTITION ASSEMBLIES**

If such a fire rated assembly is required or provided, the floor plan shall identify its location. A full height section shall be submitted illustrating method and materials for construction. (Section 706 and 708 KBC)

### **ENERGY CONSERVATION CALCULATIONS**

Forms for the necessary calculations are available upon request from Frankfort. These calculations are required on all new buildings and additions. Com or Res Check may be utilized. A free software download is available at [www.energycodes.gov](http://www.energycodes.gov). Energy calculations shall include envelope, lighting and mechanical.

**NOTICE:** *The construction of interior non- load bearing partitions, interior/exterior stairs or ramps, HVAC and electrical systems, and other areas are not reviewed as part of the Shell permit.*



**PLAN APPLICATION FORM**  
COMMONWEALTH OF KENTUCKY  
DEPARTMENT OF HOUSING, BUILDINGS AND CONSTRUCTION  
DIVISION OF BUILDING CODE ENFORCEMENT & DIVISION OF PLUMBING  
101 SEA HERO ROAD, SUITE 100  
FRANKFORT, KENTUCKY 40601-5405  
**BUILDING CODES: 502/ 573-0373 PLUMBING: 502/ 573-0397**



**NOTE: Complete all applicable spaces Please type or print**

**Today's Date:** \_\_\_\_\_ **REV.6/2002**

|   |  |   |                     |
|---|--|---|---------------------|
| <b>NAME OF PERSON SUBMITTING PLANS</b> _____ <b>PHONE ( )</b> _____ - _____   |  | <b>IS THE BCE PLAN REVIEW FEE INCLUDED WITH PLANS? (circle one)</b> YES NO  |                     |
| <b>MAILING ADDRESS:</b> _____   |  | <b>CITY</b> _____   | <b>STATE</b> _____  |
| <b>NUMBER / STREET, HWY, ROAD or P. O. BOX</b> _____  |  | <b>ZIP CODE</b> _____   | <b>COUNTY</b> _____ |
| <b>BUSINESS &amp; PROJECT NAME:</b> _____<br>(Or tenant name if multi-tenant building)  |  |   |                     |
| <b>PROJECT LOCATION:</b> _____<br>NO./ STREET, HWY or ROAD ( Please do not indicate P.O. Box or Postal Routes )   |  |   |                     |
| <b>CITY</b> _____ <b>ZIP CODE</b> _____ <b>COUNTY</b> _____   |  |   |                     |
| Is project located within the city limits <input type="checkbox"/> Yes <input type="checkbox"/> No  |  |   |                     |
| <b>OWNER (INDIVIDUAL &amp; COMPANY):</b> _____  |  | <b>PHONE ( )</b> _____ - _____  |                     |
| <b>MAILING ADDRESS:</b> _____   |  | <b>CITY</b> _____   | <b>STATE</b> _____  |
| <b>NUMBER / STREET, HWY, ROAD or P. O. BOX</b> _____  |  | <b>ZIP CODE</b> _____   | <b>COUNTY</b> _____ |
| <b>ARCHITECT (NAME &amp; FIRM)</b> _____  |  | <b>PHONE ( )</b> _____ - _____  |                     |
| I, AS THE ARCHITECT LISTED ABOVE, AM RESPONSIBLE FOR CONSTRUCTION CONTRACT ADMINISTRATION. <input type="checkbox"/> YES <input type="checkbox"/> NO   |  |   |                     |
| <b>MAILING ADDRESS:</b> _____   |  | <b>CITY</b> _____   | <b>STATE</b> _____  |
| <b>NUMBER / STREET, HWY, ROAD or P. O. BOX</b> _____  |  | <b>ZIP CODE</b> _____   | <b>COUNTY</b> _____ |
| <b>ENGINEER (NAME &amp; FIRM)</b> _____   |  | <b>PHONE ( )</b> _____ - _____  |                     |
| <b>MAILING ADDRESS:</b> _____   |  | <b>CITY</b> _____   | <b>STATE</b> _____  |
| <b>NUMBER / STREET, HWY, ROAD or P. O. BOX</b> _____  |  | <b>ZIP CODE</b> _____   | <b>COUNTY</b> _____ |
| <b>PROJECT CONTRACTOR:</b> _____  |  | <b>PHONE ( )</b> _____ - _____  |                     |
| <b>MAILING ADDRESS:</b> _____   |  | <b>CITY</b> _____   | <b>STATE</b> _____  |
| <b>NUMBER / STREET, HWY, ROAD or P. O. BOX</b> _____  |  | <b>ZIP CODE</b> _____   | <b>COUNTY</b> _____ |
| <b>BUILDING INFORMATION</b>   |  |   |                     |
| <b>NUMBER OF BUILDINGS IN THIS SUBMITTAL:</b> _____ <b>USE OF BUILDING(S)</b> ie...restaurant, office, classroom, storage or other ( please specify ) _____   |  |   |                     |
| <b>BUILDING(S) IN THIS PROJECT IS / ARE:</b> <input type="checkbox"/> NEW FREESTANDING BUILDING <input type="checkbox"/> NEW ADDITION TO EXISTING STRUCTURE <input type="checkbox"/> RENOVATION ONLY <input type="checkbox"/> RENOVATION & ADDITION                   |  |   |                     |
| <b>TOTAL AREA IN NEW BLDG. OR ADDITION:</b> _____ <b>FT<sup>2</sup></b> <b>NUMBER OF LEVELS (INCLUDING BASEMENT)</b> _____ <b>BASEMENT</b> <input type="checkbox"/> YES <input type="checkbox"/> NO   |  |   |                     |
| <b>TOTAL AREA IN EXISTING BLDG.:</b> _____ <b>FT<sup>2</sup></b> <b>DATE CONSTRUCTION TO BEGIN:</b> _____ <b>ESTIMATED COMPLETION DATE:</b> _____   |  |   |                     |
| <b>TYPE OF PLAN SUBMITTALS</b>  |  |   |                     |
| <b>BUILDING PLAN SUBMITTALS</b><br>(Check the type of evaluations requested at this time)   |  | <b>SHOP DRAWING PLAN SUBMITTALS</b><br>(Check the type of evaluations requested at this time)   |                     |
| <b>BUILDING PLAN REVIEW (BCE)</b><br>Full Building Review <input type="checkbox"/><br>Expedited Site & Foundation Review <input type="checkbox"/><br>Partial Evaluation (please specify) <input type="checkbox"/><br>_____  |  | <b>PLUMBING PLAN REVIEW</b><br>Plumbing Review <b>ONLY</b> <input type="checkbox"/><br>Water Supply Review <input type="checkbox"/><br>Waste Water Review <input type="checkbox"/><br>Other (please specify) <input type="checkbox"/><br>_____              |                     |
| <b>Suppression System (Sprinkler, CO<sub>2</sub>, Etc.)</b> <input type="checkbox"/><br><b>Alarm Systems</b> <input type="checkbox"/><br><b>Boiler System</b> <input type="checkbox"/><br><b>Bleacher Seating</b> <input type="checkbox"/><br>_____                   |  | <b>Range Hood System</b> <input type="checkbox"/><br><b>Fuel Tank</b> <input type="checkbox"/><br><b>Elevator</b> <input type="checkbox"/><br><b>Swimming Pool</b> <input type="checkbox"/><br><b>Prefabricated Truss</b> <input type="checkbox"/><br>_____ |                     |
| <b>SUBMIT ONLY ONE SET FOR BCE</b>  |  | <b>SEE BACK OF THIS FORM FOR PLUMBING PLAN SET REQUIREMENTS</b>   |                     |
| <b>THE INFORMATION IN THIS SECTION IS FOR THE DIVISION OF PLUMBING (TO BE COMPLETED BY PERSON SUBMITTING PLANS)</b>   |  |   |                     |
| <b>DESIGN CAPACITY OF BUILDING:</b> NO. OF MALES _____ NO. OF FEMALES _____ <b>ARE RESTROOMS ACCESSIBLE TO PUBLIC ?</b> <input type="checkbox"/> YES <input type="checkbox"/> NO  |  |   |                     |
| <b>SEWAGE DISPOSAL:</b> <b>TYPE:</b> <input type="checkbox"/> MUNICIPAL <input type="checkbox"/> PRIVATE <b>ARE RESTROOMS ACCESSIBLE TO DISABLED ?</b> <input type="checkbox"/> YES <input type="checkbox"/> NO   |  |   |                     |
| <b>WATER SUPPLY:</b> <input type="checkbox"/> PUBLIC <input type="checkbox"/> DRILLED WELL <input type="checkbox"/> CISTERN <input type="checkbox"/> HAULED WATER <input type="checkbox"/> ROOF WATER <input type="checkbox"/> SPRING <input type="checkbox"/> STREAM |  |   |                     |
| IF PRIVATE, INDICATE THE TYPE AND THE DESIGN: _____   |  |   |                     |
| <b>BY WHOM:</b> _____<br>NAME _____ TITLE _____ REGISTRATION NUMBER _____   |  |   |                     |
| <b>THIS SECTION TO BE COMPLETED BY THE LOCAL HEALTH DEPARTMENT OFFICIAL ( Must be completed prior to sending Plumbing Plans to Frankfort )</b>  |  | <b>THIS AREA FOR DEPARTMENT USE ONLY</b>  |                     |
| <b>REVIEWED BY:</b> _____<br>NAME _____ DATE: _____<br>TITLE _____  |  |   |                     |
| <b>APPROVED BY:</b> _____<br>COUNTY OR DISTRICT HEALTH DEPARTMENT: _____  |  |   |                     |

1. A Plan Submission Application Guide (PSAG) describing the plan submission procedures is available upon request. Copies may be obtained by calling or writing to the Department of Housing, Buildings and Construction, Division of Building Code Enforcement or the Division of Plumbing. Our telephone numbers are: Building Codes 502/573-0373 or Plumbing 502/573-0397. Local Boards of Health should also be aware of these procedures.
2. KRS Chapters 322 & 323 should be consulted to determine the requirements for a Registered Design Professional such as an Architect and / or Engineer
3. **PLUMBING:** Plumbing installations shall be made in conformance with the State Plumbing Code. The plumbing systems shall be shown in plan view and elevation view (Riser Diagram). These plans shall indicate the location of all fixtures, water distribution system and soil, waste & vent pipe systems. The size and material of all soil, waste & vent piping shall be clearly stated on the plans.
4. Check the regulations that may be applicable to the building type, such as: Kentucky Food Services Regulation, Kentucky Youth Camp Regulation, Kentucky Retail Food Market Regulation, etc..

### ???? HOW MANY SETS OF PLANS TO SUBMIT ????

- I. **NUMBER OF PLAN SETS REQUIRED TO BE SUBMITTED:** Of the number of plan sets required, at least one shall be a complete set of construction documents and the remaining sets may consist of plumbing plans only. **Note: When submitting plans for specialized systems such as fire alarm or fire sprinkler systems, only one(1) set of plans is required. Any plan submittal that does not involve plumbing should only have one(1) plan for the Division of Building Code Enforcement.**

**NOTE: A plan set consists of 1 plan and 1 plan application form.**

**NOTE: When copying this form it is not necessary to copy this side.**

- 1) Counties or Cities not listed below - One(1) complete plan set and three (3) plumbing plan sets for a total of four (4) plan sets-----
- 2) a) If in the city limits of Louisville - One(1) complete plan set and five (5) plumbing plan sets for a total of six (6) plan sets-----  
 b) If in Jefferson County and not within Louisville City Limits -  
 One(1) complete plan set and four(4) plumbing plan sets for total of five (5) sets-----

**NOTE: ALWAYS CHECK TO SEE IF ARCHITECTURAL REVIEW IS REQUIRED IN FRANKFORT BY THE DIVISION OF BUILDING CODES**

**TOTAL NUMBER OF PLAN SETS REQUIRED TO BE SUBMITTED**-----

### II. **ADDITIONAL PLAN SETS REQUIRED:**

- 1) Project has a swimming pool - add one (1) plumbing plan set-----
- 2) Project has a private water supply - add one (1) plumbing plan set-----
- 3) Project has a private sewage disposal system with treated effluent - add one (1) plumbing plan set-----

**TOTAL NUMBER OF PLAN SETS REQUIRED TO BE SUBMITTED**-----

### SPECIAL PERMITS ARE REQUIRED FOR WATER SUPPLY AND WASTE WATER DISCHARGE PROJECTS

Applications and fees are required to be submitted to the Department of Housing, Buildings and Construction or the Division of Water of the Natural Resources Cabinet for the following facilities:

1. **WASTE WATER DISCHARGE PROJECTS**
  - a. Private packaged treatment plant with surface discharge.
  - b. Sanitary sewer extension that includes a manhole or lift station.
  - c. Extension or addition to a sanitary sewer district with no building structures involved.
  - d. Individual pre-treatment facilities.
2. **WATER SUPPLY PROJECTS**
  - a. Private water supply to individual structure ( **Excluding Single Family Dwellings** ).
  - b. Addition to city or county water districts.
  - c. Water supply treatment plants

**TO OBTAIN SPECIAL APPLICATION FORMS AND TO DETERMINE IF A FEE IS REQUIRED, CONTACT THE NATURAL RESOURCES/ DIVISION OF WATER IN FRANKFORT @ 502/564-3410**

If this project involves a plumbing system or plan related to a structure (building) approval, submit one(1) complete plan set and four(4) plumbing plan sets to the following:  
 NOTE: One of the plumbing plan sets will be forwarded to the Division of Water.

DEPARTMENT OF HOUSING, BUILDINGS AND CONSTRUCTION  
 101 SEA HERO ROAD, SUITE 100  
 FRANKFORT, KENTUCKY 40601-5405

502/573-0397

If this project **does not** involve a plumbing system or a structure (building) approval, submit four(4) plumbing plan sets and appropriate fee to:

DIVISION OF WATER  
 18 REILLY ROAD, FRANKFORT OFFICE PARK  
 FRANKFORT, KENTUCKY 40601  
 502/564-3410

**Department of Housing, Buildings and Construction  
Division of Building Code Enforcement  
2007 KBC PLAN REVIEW FEE WORKSHEET**

(PLAN REVIEW FEES ARE NOT REQUIRED FOR PROJECTS THAT ARE PLUMBING ONLY)

FEE PAID BY: \_\_\_\_\_ PH. (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

COMPANY: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

CITY/ STATE/ ZIP: \_\_\_\_\_

FOR:

BUSINESS NAME: \_\_\_\_\_

PROJECT NAME: \_\_\_\_\_

STREET NAME: \_\_\_\_\_

CITY: \_\_\_\_\_ COUNTY \_\_\_\_\_

(Please indicate if inside the city limits, ☐ YES or ☐ NO )

Date: \_\_\_\_\_

Check #: \_\_\_\_\_

Check Amount: \$ \_\_\_\_\_

### CALCULATING YOUR FEE

When calculating the total (gross) area, please use the outside dimensions of the structure. Include the area of all usable floor space, mezzanine levels, basements and all areas within horizontal projection of the roof.

**NEW CONSTRUCTION:**

Cost per square foot: \_\_\_\_\_ X total area \_\_\_\_\_ = **FEE** \$ \_\_\_\_\_  
(SEE FEE SCHEDULE)

**ADDITIONS TO EXISTING BUILDINGS:**

Cost per square foot: \_\_\_\_\_ X total area of addition \_\_\_\_\_ = **FEE** \$ \_\_\_\_\_  
(SEE FEE SCHEDULE)

**ALTERATIONS OR REPAIRS:**

.0025 X cost of alterations \$ \_\_\_\_\_ or same as **NEW CONSTRUCTION**, whichever is less = **FEE** \$ \_\_\_\_\_

**TOTAL FEE THIS SECTION** \$ \_\_\_\_\_

The minimum fee for review of plans under this section shall be two hundred dollars. (\$200).

**Include** the following specialized fees only when the plans for the specialized system accompany payment.  
*See **FEE SCHEDULE** on reverse side for specialized fees.*

|                                       |                                     |
|---------------------------------------|-------------------------------------|
| Sprinkler Fee _____                   | Clean Agent Suppression Fee _____   |
| Fire Detection Fee _____              | Commercial Range Hoods _____        |
| Standpipe Fee _____                   | Dry Chemical Systems _____          |
| CO <sup>2</sup> Suppression Fee _____ | Haz. Materials Tank Fee _____       |
| Foam Suppression Fee _____            | <b>TOTAL SPECIALIZED FEES</b> _____ |

When submitting plans, please include one copy of the worksheet, the required number of plans and your check, rounded to the nearest dollar, made payable to the **Kentucky State Treasurer**. The **name** and **location** of the project must be indicated on the check and plans to ensure proper credit.

**SUBMIT TO:**

Department of Housing, Buildings and Construction  
Division of Building Code Enforcement - **Fee Accounts**  
101 Sea Hero Road Suite 100  
Frankfort, Kentucky 40601-5405  
502/ 573-0373

**SEE FEE SCHEDULE ON REVERSE SIDE**

**2007 KENTUCKY BUILDING CODE  
SECTION 121.0 PLAN REVIEW AND INSPECTION FEES**

EFFECTIVE DATE: 8/15/2001

**121.1 General:** A permit to begin work for new construction, alteration, removal or other building operations shall not be issued until the fees prescribed by law shall have been paid to the Department, if applicable, and to the local building department. If an amendment to a permit necessitates an additional fee because of an increase in the estimated cost of the work involved, the permit shall not be approved until the additional fee has been paid.

**121.2 Special fees:** Payment of fees for construction, alteration or removal, and for all work done in connection with or concurrently with the work contemplated by a building permit shall not relieve the applicant or holder of the permit from the payment of other fees that may be prescribed by law or ordinance for water taps, sewer connections, electrical permits, erection of signs and display structures, marquees or other appurtenant structures, or fees of inspections or certificates of occupancy or other privileges or requirements established by law.

**121.3 State jurisdiction:** The fees for plan examination and inspection functions required by the Department of Housing, Buildings and Construction shall be as prescribed in Sections 121.3.1 through 121.3.16, as applicable.

**121.3.1 Fee schedule:** The fees shall be paid in accordance with Table 121.3.1

**Table 121.3.1**

| <b>DEPARTMENT OF HOUSING FEE SCHEDULE</b> |                             |
|---|-----------------------------|
| <b>Occupancy type</b>                     | <b>Cost per square foot</b> |
| Assembly                                  | 8.5 cents                   |
| Business                                  | 7.5 cents                   |
| Day care centers                          | 7.5 cents                   |
| Educational                               | 7.5 cents                   |
| Frozen food plants                        | 6.5 cents                   |
| High hazard                               | 7.5 cents                   |
| Industrial factories                      | 6.25 cents                  |
| Institutional                             | 8.5 cents                   |
| Mercantile                                | 7.5 cents                   |
| Residential                               | 7.5 cents                   |
| Warehouses                                | 5.5 cents                   |

**121.3.1.1 Fast track elective:** For permit applicants seeking early site and foundation approval prior to full review of complete set of construction documents, the fee shall be that as calculated from Table 121.3.1 plus 50 percent of the full fee. The additional 50 percent fee shall not be less than \$400 and not more than \$3,000. The entire fee shall be paid at the time of the initial plans submission.

**121.3.2 Submission of plans and fees:** All plans and specifications required to be submitted to the Department by this code shall be accompanied by the applicable fee as set forth herein, rounded to the nearest dollar.

**121.3.3 Method of payment:** All fees required herein shall be in check form payable to the Kentucky State Treasurer.

**121.3.4 Construction approval:** Approval for construction shall not be issued by the Department until all required fees have been paid.

**121.3.5 New construction:** Departmental plan review fees for new buildings shall be calculated by multiplying the total building area under construction by the cost per square foot of each occupancy type as listed in Table 121.3.1. Total square footage of the building shall be determined by the outside dimensions of the building. Minimum fee for review of plans under this section shall be \$200. The fee for buildings with multiple or mixed occupancies may be calculated by using the cost per square foot multiplier of the predominant use.

**121.3.6 Additions to existing buildings:** Plan review fees for additions to existing buildings, which shall not require the entire building to conform to the Kentucky Building Code, shall be calculated in accordance with Table 121.3.1 by the measurements of the square footage of the addition, as determined by the outside dimensions of the addition. Minimum fee for the review of plans under this section shall be \$200.

**121.3.7 Change in use:** Plan review fees for existing buildings in which the use group or occupancy type is changed shall be calculated in accordance with Table 121.3.1 by using the total square footage of the entire building or structure under the new occupancy type as determined by the outside dimensions. Minimum fee for review of plans under this section shall be \$200.

**121.3.8 Alterations and repairs:** Plan review fees for alterations and repairs not otherwise covered by this fee schedule shall be calculated by multiplying the cost for the alterations or repairs by 0.0025; or calculated by multiplying the total area being altered, or repaired by the cost per square foot of each occupancy type as listed in Table 121.3.1, whichever is less. The total square footage shall be determined by the outside dimensions of the area being altered or repaired. The minimum fee for review of plans under this section shall be \$200.

**121.3.9 Specialized fees:** In addition to the above fees, the fees in Table 121.3.9 shall be applied for the specialized plan reviews listed.

**Table 121.3.9**

| <b>AUTOMATIC SPRINKLER REVIEW FEE TABLE</b> |  |
|---|--|
| <b>Sprinkler heads</b>                      | <b>Fee</b>                                 |
| 004 – 200                                   | \$200                                      |
| 201 – 300                                   | \$225                                      |
| 301 – 400                                   | \$275                                      |
| 401 – 750                                   | \$325                                      |
| Over 750                                    | \$325 plus 30 cents per sprinkler over 750 |

**121.3.10 Fire detection system review fee:** Zero to 20,000 square feet shall be \$200; over 20,000 square feet shall be \$200 plus \$30 for each additional 10,000 square feet in excess of 20,000 square feet.

**121.3.11 Standpipe review fee:** \$200 (combination standpipe and riser plans shall be reviewed under the automatic sprinkler review fee schedule).

**121.3.12 Carbon dioxide suppression review fee:** One to 200 pounds of agent shall be \$200, over 200 pounds of agent shall be \$200 plus 3 cents per pound in excess of 200 pounds.

**121.3.13 Clean agent suppression system review fee:** Up to 35 pounds of agent shall be \$200; over 35 pounds shall be \$200 plus 10 cents per pound in excess of 35 pounds. The fee for gaseous systems shall be 10 cents per cubic foot and not less than \$200.

**121.3.14 Foam suppression system review fee:** \$.50 per gallon of foam concentrate where the system is not part of an automatic sprinkler system. Foam suppression system plans that are submitted as part of an automatic sprinkler system shall be reviewed under the automatic sprinkler system review fee schedule. The fee for review of plans under this section shall not be less than \$200 or more than \$1,500.

**121.3.15 Commercial range hood review fee:** \$150 per hood.

**121.3.16 Dry chemical systems review fee (except range hoods):** One to 30 pounds of agent shall be \$200; over 30 pounds of agent shall be \$200 plus 25 cents per pound in excess of 30 pounds.

**SEE FEE WORKSHEET ON REVERSE SIDE**

**FIRE SUPPRESSION DESIGN CRITERIA**CASE NUMBER<sup>1</sup>: \_\_\_\_\_ DATE: \_\_\_\_\_

PROJECT OR FACILITY NAME: \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ COUNTY: \_\_\_\_\_

**WATER FLOW INFORMATION:** (See work sheet on reverse side)

STATIC: \_\_\_\_\_ PSI

RESIDUAL: \_\_\_\_\_ PSI

WATER FLOW: \_\_\_\_\_ GPM

DURATION:<sup>2</sup> \_\_\_\_\_ MINSOURCE OF WATER SUPPLY:<sup>3</sup> \_\_\_\_\_SOURCE OF WATER FLOW DATA:<sup>4</sup> \_\_\_\_\_DATE AND TIME OF WATER FLOW TEST:<sup>5</sup> \_\_\_\_\_ANTICIPATED WATER DEMAND:<sup>6</sup> \_\_\_\_\_ PSI

\_\_\_\_\_ GPM

CLASSIFICATION OF HAZARD(S):<sup>7</sup> \_\_\_\_\_OCCUPANCY OF BUILDING:<sup>8</sup> \_\_\_\_\_

SPECIFIC TYPES OF SUPPRESSION SYSTEM(S): \_\_\_\_\_

NFPA STANDARD(S) FOLLOWED IN DESIGN:<sup>9</sup> \_\_\_\_\_**EXPLANATORY NOTES:**

1. CASE NUMBER: (if known)
2. DURATION: The length of time that the water source is capable of providing adequate water during a fire condition
3. SOURCE OF WATER SUPPLY: Tank, Lake, Etc.
4. SOURCE OF WATER FLOW DATA: Person or persons who conducted test.
5. DATA AND TIME OF WATER FLOW TEST: Water flow test shall have been conducted within the past six months.
6. ANTICIPATED WATER DEMAND: Minimum water and pressure required to operate this system.
7. HAZARD CLASSIFICATION: Light, Ordinary Group 1, 2, 3, Extra Hazard Group 1, 2.
8. OCCUPANCY OF BUILDING: Mercantile, Restaurant, Office, School, Industrial Plant, etc.
9. NFPA STANDARD(S) FOLLOWED IN DESIGN: 13, 14, 22, 24, 230 etc.

I \_\_\_\_\_, verify that the fire suppression design criteria is in accordance with all applicable codes and standards adopted by the Commonwealth and that the water flow information noted above is true and accurate. I further acknowledge that I have reviewed the anticipated water demand for this system and find the actual water flow and pressure adequate to serve this system. It is understood that I will be responsible for the approval of the final shop drawings prior to their submittal to the Division of Building Codes Enforcement:

COMPANY: \_\_\_\_\_

STREET: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_

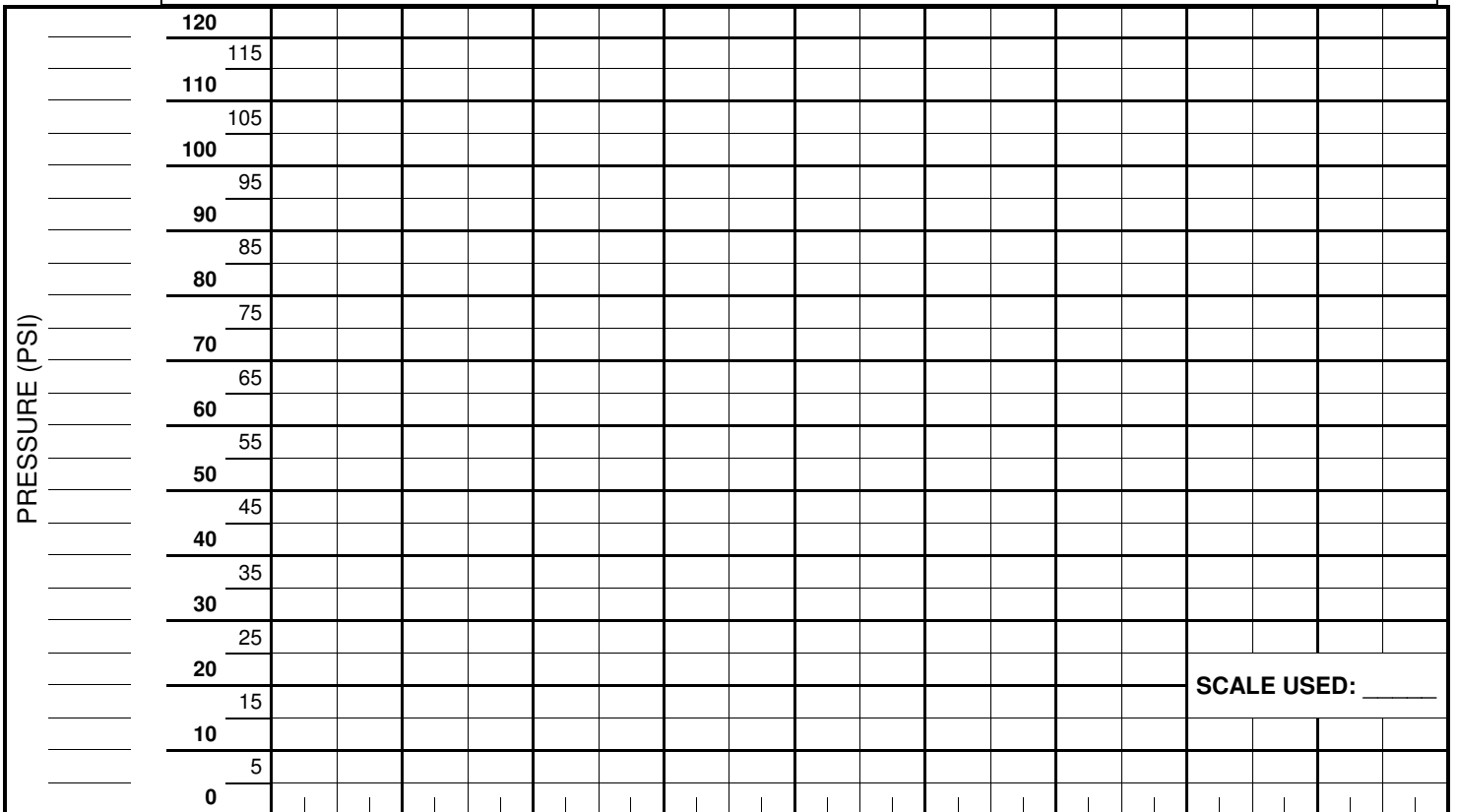
AFFIX SEAL AND SIGNATURE HERE

# FIRE FLOW TEST DATA SHEET

| STATIC<br>PRESSURE<br>(psi) | RESIDUAL<br>PRESSURE<br>(psi) | PITOT<br>PRESSURE<br>(psi) | FLOW<br>(gpm) | HYDRANT<br>NOZZLE<br>COEFFICIENT | HYDRANT<br># | HYDRANT<br>BUTT # | FLOW<br>OPENINGS<br>(inches) | REMARKS |
|-----------------------------|-------------------------------|----------------------------|---------------|----------------------------------|--------------|-------------------|------------------------------|---------|
|                             |                               |                            |               |                                  |              |                   |                              |         |
|                             |                               |                            |               |                                  |              |                   |                              |         |
|                             |                               |                            |               |                                  |              |                   |                              |         |
|                             |                               |                            |               |                                  |              |                   |                              |         |
|                             |                               |                            |               |                                  |              |                   |                              |         |

## INSTRUCTIONS:

1. Sketch the site showing road(s), building(s), water main(s) and location of test hydrants.
2. Record the test data in the table provided.
3. Plot the graph and determine required design data.
4. Transpose data on the Fire Suppression Design Criteria cover sheet (reverse side). **SKETCH TEST LOCATION HERE**



|         |     |     |      |      |      |      |      |      |      |
|---------|-----|-----|------|------|------|------|------|------|------|
| Scale A | 100 | 200 | 300  | 400  | 500  | 600  | 700  | 800  | 900  |
| Scale B | 200 | 400 | 600  | 800  | 1000 | 1200 | 1400 | 1600 | 1800 |
| Scale C | 400 | 800 | 1200 | 1600 | 2000 | 2400 | 2800 | 3200 | 3600 |

**NOTE:** Indicate scale used on graph.

FLOW – GPM



| LOCAL AND STATE RESPONSIBILITY FOR PLAN REVIEW AND INSPECTION OF NEW AND EXISTING BUILDINGS RELATED TO THE KENTUCKY BUILDING CODE |  |              |  | 815 KAR 10:020 SECTION 7<br>KBC CHAPTER 1 SECTIONS 104.1 AND 104.2 KRS 198B |  |              |
|---|--|--------------|--|---|--|--------------|
| Use Group (Occupancy)   | Local Authority has assumed no responsibility <sup>6</sup> |              | Local authority has assumed minimum responsibility <sup>2, 3, 4, 6</sup> |   | Local Authority has assumed full responsibility <sup>1, 6, 7</sup> |              |
|   | (Obtain Local Permit Only)                                 | State Review | Local Review   | State Review  | Local Review   | State Review |
| Single Family Dwellings   | NA   | NA           | All  | NA  | All  | NA           |
| Duplexes, Townhouses  | NA   | All          | All  | NA  | All  | NA           |
| R-1 Residential –Hotels, Motels   | NA   | All          | Up to 3 Stories and Less than 20,000 sq. ft.                             | More than 3 Stories or 20,000 sq. ft. or more                               | All  | None         |
| R-2 Residential – Multi Family<br>R-3<br>R-4- Residential- non-licensed<br>Residential Care Facilities                            | NA   | All          | Up to 3 Stories and Less than 20,000 sq. ft.                             | More than 3 Stories or 20,000 sq. ft. or more                               | All  | None         |
| B- Business Offices   | NA   | All          | 100 persons or less  | 101 Persons or more   | All  | None         |
| M- Mercantile- Retail Stores  | NA   | All          | 100 persons or less  | 101 persons or more   | All  | None         |
| F-1 Factory – Industrial<br>F-2 Factory   | NA   | All          | 20,000 sq. ft. or less than 100 persons                                  | More than 20,000 sq. ft. or more than 101 persons                           | All  | None         |
| S-1 Storage Moderate<br>S-2 Storage Low   | NA   | All          | 20,000 sq. ft. or less   | More than 20,000 sq. ft.  | All  | None         |
| A-1 Assembly- Theaters, Bars<br>A-2 Restaurants, Recreation<br>A-3 Centers  | NA   | All          | 100 persons of less  | 101 Persons or more   | All  | None         |
| A-4 Assembly- - Churches  | NA   | All          | 6,000 sq. ft. or less and 400 persons of less                            | 6,001 sq. ft. or more and 401 persons or more                               | All  | None         |
| E-Educational – Schools   | NA   | All          | None   | All   | All  | None         |
| E Daycare   | NA   | All          | None   | All   | None   | All          |
| I-1 Institutional –Group Homes<br>I-2 Nursing Homes, Hospitals<br>I-3 Jails, Reformatories  |  |              |  |   |  |              |
| H- High Hazard  | NA   | All          | None   | All   | None   | All          |
| State Owned Buildings<br>(Also State Leased)  | NA   | All          | None   | All   | None   | All          |
| Industrialized Building Systems<br>(Units Constructed In Factory)   | NA   | All          | None   | All   | None   | All          |
| Mixed Use   | NA   | All          | Footnote 5   | Footnote 5  | ALL <sup>8</sup>   | None         |

#### FOOTNOTES:

1. Check for special agreements with local officials or the DHBC
2. RENOVATIONS to existing building that exceed requirements for local review responsibility will be reviewed by the State.
3. ADDITIONS to existing buildings will require state review if the existing size plus the addition exceed the allowable size for local review.
4. See page 7 of this guide or Table 1004.1.1 of the KBC to determine occupant load
5. Contact Frankfort at (502) 573-0373 to determine

occupant load and review requirements.

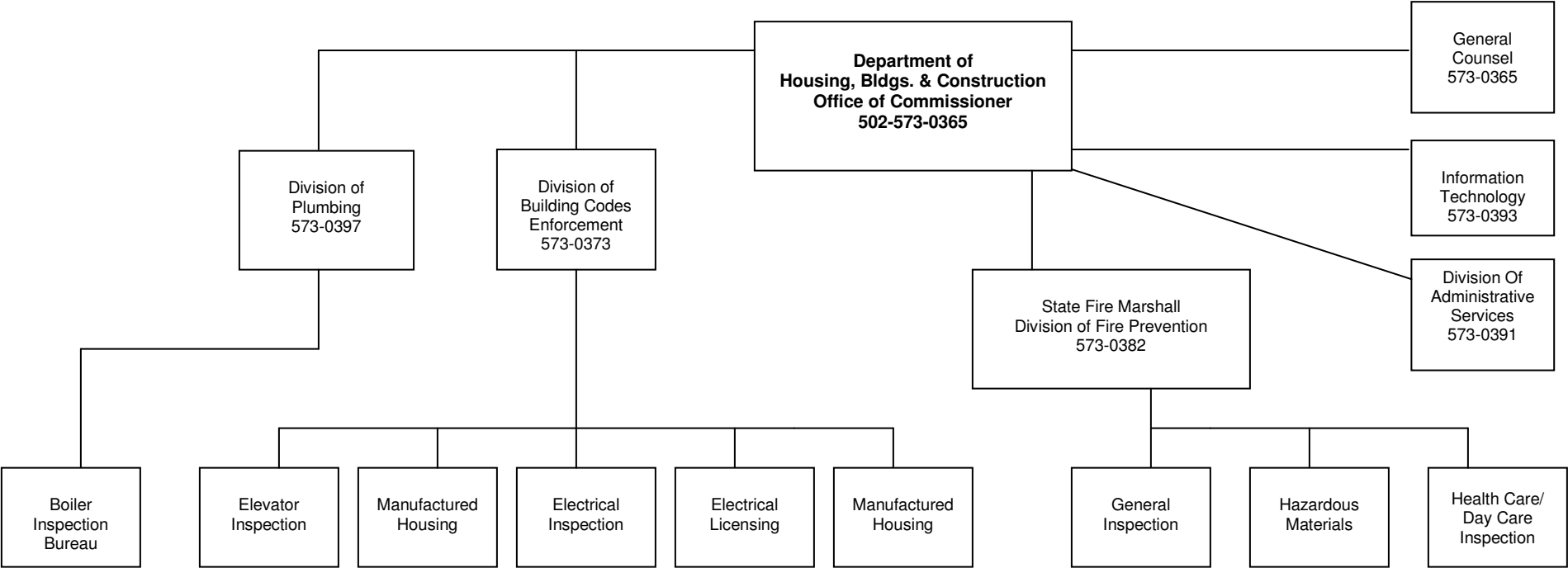
6. For work which is exempt for permit requirements see Kentucky Building Code, Section 105.2
7. Expanded jurisdiction contracts may vary from jurisdiction to jurisdiction. Please contact local authority or the DHBC if you have questions.
8. Unless any of the uses involved are identified as state review even though local authority has assumed full Responsibility.

# DEPARTMENT OF HOUSING BUILDINGS AND CONSTRUCTION

## OTHER USEFUL TELEPHONE NUMBERS

|                                  |              |
|----------------------------------|--------------|
| Architects Board.....            | 606-277-3312 |
| Asbestos Abatement.....          | 502-564-6895 |
| Corrections Cabinet.....         | 502-564-4726 |
| Department of Education.....     | 502-564-4770 |
| Economic Development.....        | 502-564-7670 |
| Engineers Board.....             | 502-564-2680 |
| Finance Cabinet.....             | 502-564-4240 |
| Geological Survey.....           | 606-257-5500 |
| Historic Properties.....         | 502-564-3000 |
| Housing Corporation.....         | 502-223-2148 |
| Human Resources.....             | 502-564-7130 |
| Kentucky Heritage Council.....   | 502-564-7003 |
| Emissions Control Report.....    | 502-564-2150 |
| Environmental Impact Report..... | 502-564-3035 |
| Swimming Pools.....              | 502-564-7818 |
| Licensing & Regulation.....      | 502-564-2800 |

Overview  
(Important Telephone Numbers and Functions of Various Divisions)  
NOTE: This is information only. This is not an organizational chart.



# LICENSE REQUIREMENTS

| TRADE  | INSTALLATION CONTRACTOR                        | INSPECTION BY:   | PERMIT/CERTIFICATES ISSUED:                      |
|--|--|--|--|
| GENERAL ERECTION AND CONSTRUCTION<br>502-573-0373  | NO LICENSE REQUIRED                            | STATE or LOCAL JURISDICTION  | CONSTRUCTION PERMITS<br>OCCUPANCY CERTIFICATE    |
| PLUMBING<br>502-573-0397   | STATE LICENSE REQUIRED                         | STATE or LOCAL JURISDICTION  | CERTIFICATE OF APPROVAL                          |
| SPRINKLERS/SUPPRESSION<br>502-573-0385   | STATE LICENSE REQUIRED                         | STATE or LOCAL JURISDICTION  | CERTIFICATE OF APPROVAL                          |
| ELECTRICAL<br>502-573-0382   | STATE LICENSE REQUIRED                         | STATE or LOCAL JURISDICTION  | ELECTRICAL CERTIFICATE BY INSPECTOR              |
| MECHANICAL (HVAC)<br>502-573-0395  | STATE LICENSE REQUIRED                         | STATE or LOCAL JURISDICTION  | INSTALLATION PERMIT REQUIRED                     |
| ELEVATORS<br>(502) 573-0382  | NEED PERMIT NO. LICENSE REQUIRED               | STATE INSPECTOR  | CERTIFICATE BY STATE INSPECTOR REQUIRED ANNUALLY |
| BOILER<br>502-573-0382   | STATE LICENSE REQUIRED                         | STATE INSPECTOR  | INSTALLATION PERMIT/OPERATING CERTIFICATE        |
| FIRE ALARM<br>502-573-0385   | NO LICENSE REQUIRED                            | STATE INSPECTOR  | ALARM CERTIFICATE BY CERTIFIED INSPECTOR         |
| SWIMMING POOL CONTRACTOR<br>502-573-0373   | NO LICENSE REQUIRED                            | STATE or LOCAL JURISDICTION  | CONSTRUCTION PERMIT AND OCCUPANCY CERTIFICATE    |
| WELDING (BOILERS)<br>502-573-0382  | LICENSE REQUIRED                               | STATE or LOCAL JURISDICTION  | CERTIFIED BY CONTRACTOR                          |
| PAINTING<br>502-573-0373   | NO LICENSE REQUIRED                            | STATE or LOCAL JURISDICTION  | NONE   |
| TANK INSTALLER<br>502/573-0382   | CERTIFIED CONTRACTOR FOR UNDEGROUND TANKS      | STATE INSPECTOR  | STATE PERMIT ISSUED AT JOB SITE                  |
| GLAZING INSTALLER<br>502-573-0373  | NO LICENSE REQUIRED                            | STATE or LOCAL JURISDICTION  | NONE   |
| MOBILE/MANUFACTURED HOUSING PRODUCER<br>502-573-0373   | STATE APPROVAL REQUIRED AT MANUFACTURER'S SITE | STATE INSPECTED AT DEALER LOT  | STATE PERMIT ISSUED AT JOB SITE                  |
| INDUSTRIALIZED BLDG. SYSTEM/MODULAR MFR.<br>502-573-0373                                       | MANUFACTURER OBTAINS MODEL PLAN APPROVAL       | SITE INSPECTED BY STATE – IN-PLANT INSP. BY APPROVED 3 <sup>rd</sup> PARTY   | CONSTRUCTION PERMITS AND OCCUPANCY CERTIFICATE   |
| FOR ESTABLISHING THESE BUSINESSES IN THE COMMONWEALTH OF KENTUCKY, IT IS ADVISABLE TO CONTACT: |  | CABINET FOR ECONOMIC DEVELOPMENT<br>BUSINESS INFORMATION CLEARINGHOUSE<br>CAPITAL PLAZA TOWER, 24 <sup>th</sup> FLOOR<br>FRANKFORT, KENTUCKY 40601<br>(502) 564-4252 |  |

**BUILDING AND FIRE SAFETY CODES USD IN KENTUCKY FOR VARIOUS YEARS**

| <b>Mandatory date</b> | <b>Standard</b>   |
|-----------------------|---|
| March 15, 1963        | Standards of safety Adopted the National Building Code (NBC) 1955 Edition with 1957 and 1963 Amendments: National Electrical Code 1962 Edition (Local Building Codes may be more restrictive)   |
| January 14, 1972      | Standards of Safety Adopted the National Building Code (NBC) 1967 Edition: National Fire Codes (NFC) Volume 1 thru 10, 1970-71 Edition; National Electrical Code-1968 edition (Local Building Codes may be more restrictive)          |
| November 7, 1973      | Standards of Safety Adopted the National Building Code (NBC) 1967 Edition; National Fire Codes (NFC Volumes 1-10, 1962-73 Edition: National Electrical Code –1971 Edition (Local Building Codes may be more restrictive)              |
| November 20, 1974     | Standards of Safety (806 KAR 50:010) National Building Codes (NBC) 1967 Edition; National Fire Codes (NFC) Volumes 1 thru 10, 1973-74 Edition; National electrical Code – 1971 Edition (Local Building Codes may be more restrictive. |
| April 6, 1977         | Standards of Safety (806 KAR 50:010) National Building Codes (NBC) 1975 Edition; National Fire codes (NFC) Volumes 1 thru 16, 1976 Edition (Local Building Codes may be more restrictive)   |
| February 15, 1980     | 1980 Kentucky Building Code (KBC) First Edition; BOCA Mechanical Code 1981 Edition; National electrical Code-1981 Edition   |
| May 7, 1980           | Standards of Safety (806 KAR 10:015) National Fire Code (NFC) 1979 Edition; National Electrical Code-1978 Edition   |
| February 3, 1983      | 1983 Kentucky Building Code (KBC) 2 <sup>nd</sup> Edition; BOCA Mechanical Code-1981 Edition; National Electrical Code- 1981 edition  |
| December 1, 1985      | 1985 Kentucky Building Code (KBC) 3 <sup>rd</sup> edition; BOCA Mechanical Code-1984 edition; national Electrical code-1981 edition   |
| January 1, 1988       | 1988 Kentucky Building code (KBC) 4 <sup>th</sup> Edition; BOCA Mechanical Code-1987 Edition; National Electrical Code-1987 Edition   |
| September 11, 1990    | Kentucky Fire Prevention Code: Standards of Safety  |
| January 1, 1991       | 1991 Kentucky building Code (KBC) 5 <sup>th</sup> Edition; BOCA Mechanical Code-1990 Edition; National Electrical Code-1990 Edition   |
| July 1, 1994          | 1994 Kentucky Building Code (KBC) 6 <sup>th</sup> Edition; BOCA Mechanical Code-1993; National electrical Code-1993 Edition   |
| July 1, 1997          | 1997 Kentucky Building Code (KBC) 7 <sup>th</sup> Edition; BOCA Mechanical Code-1993 Edition; National Electrical Code 1996   |
| January 1, 2001       | 2002 Kentucky Building Code (KBC) 8 <sup>th</sup> Edition, International Mechanical Code 2002 Edition, National Electrical Code 2002 Edition  |
| July 6, 2007          | 2007 Kentucky Building Code (KBC) 9 <sup>th</sup> Edition, International Mechanical Code 2006 Edition, National Electrical Code 2005 Edition  |

## **CODES CURRENTLY ADOPTED BY KENTUCKY**

- 2007 Kentucky Building Code (Based on the 2006 International Building Code)
- 2006 International Mechanical Code
- 2006 Kentucky Fire Prevention Code (Standards of Safety)
- 2006 International Energy Conservation Code
- 2007 Kentucky Residential Code (Based on the 2006 International Residential Code)
- 2006 Kentucky Building Code (Day Care Centers – see Section 421 for special requirements)
- 2005 NFPA 70 National Electrical Code
- 2006 International Fire Code (IFC) (New construction projects, only when specifically referenced by the body of KBC)
- 2000 NFPA101-Life Safety Code (Health Care Facilities)
- 2000 International Fire Prevention Code for Portable Extinguishers (Section 906)
- 2001 State Boiler Regulation
- 2002 NFPA 13- Sprinkler Systems
- 2002 NFPA 13D-Sprinkler Systems – One/Two Family Dwelling
- 2002 NFPA 13R-Sprinkler systems in Residential Occupancies
- 2003 NFPA 14-Standpipe, Hose Systems
- 2002 NFPA 72-Fire Alarm
- 2003 ICC/ANSI A117.1 Accessible and Usable Buildings and Facilities

The above is only representative of the many codes and standards currently used in the Kentucky; and, is for reference only. For specific applications not listed above, contact the Department of Housing, Buildings and Construction, Division of Building Codes Enforcement at (502) 573-0373 or refer to Chapter 35 of the KBC.

Case Number: \_\_\_\_\_

Project Name: \_\_\_\_\_

City/County: \_\_\_\_\_

***AFFIDAVIT OF ASSURANCES  
PURSUANT OF KRS 198B.060(10)***

Comes the Applicant, (Please Print Name) \_\_\_\_\_  
and states pursuant to KRS 198B.060(10), that all contractors and subcontractors employed or that will be employed on any activity under the above referenced project shall be in compliance with the Commonwealth of Kentucky requirements for Workers' Compensation Insurance (according to KRS Chapter 342) and Unemployment Insurance (according to KRS Chapter 341).

This the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
CONTRACTOR, OWNER OR OWNE'S AGENT

The foregoing Affidavit of Exemption was acknowledged and sworn to before me by  
\_\_\_\_\_, Applicant, on this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
NOTARY PUBLIC  
KENTUCKY STATE AT LARGE

MY COMMISSION EXPIRES \_\_\_\_\_, 20\_\_\_\_.

Note: This Affidavit of Assurances shall be submitted for any project under State jurisdiction and where there is no local building official. Persons claiming exemption to the Workers' Compensation Laws should file an Affidavit of Exemption with the Kentucky Department of Workers' Claims, Division of Security & Compliance, 1270 Louisville Road, Frankfort, Kentucky 40601. (800/554-8601).

# BEFORE YOU BUILD

## CHECKLIST OF POSSIBLE PERMITS AND PLAN REQUIREMENTS BEFORE CONSTRUCTION BEGINS

|  |                     |              |
|--|---------------------|--------------|
| <input type="checkbox"/> PLUMBING PERMIT (STATE ISSUED)                        |                     | 502-573-0397 |
| <input type="checkbox"/> ACCESSIBILITY (STATE & LOCAL)                         |                     | 502-573-0373 |
| <input type="checkbox"/> FLOOD CONTROL PERMIT (STATE & LOCAL)                  |                     | 502-564-2979 |
| <input type="checkbox"/> EARTHQUAKE ZONE REQUIREMENTS (STATE & LOCAL)          |                     | 502-573-0373 |
| <input type="checkbox"/> ENERGY CALCULATIONS (STATE & LOCAL)                   |                     | 502-573-0393 |
| <input type="checkbox"/> ENVIRONMENTAL IMPACT REPORT (STATE)                   |                     | 502-564-3035 |
| <input type="checkbox"/> EMISSIONS CONTROL REPORT (STATE)                      |                     | 502-573-3382 |
| <input type="checkbox"/> ARCHITECTS AND ENGINEERS REQUIREMENTS (STATE & LOCAL) |                     |              |
|  | ARCHITECTS BOARD    | 859-246-2431 |
|  | ENGINEER'S SOCIETY  | 502-573-2680 |
| <input type="checkbox"/> PLAN APPROVAL (STATE & LOCAL)                         | (Page 3, 4 and 17)  | 502-573-0373 |
| <input type="checkbox"/> CONSTRUCTION PERMIT (STATE & LOCAL)                   | (Page 3,4,9 and 10) | 502-573-0373 |
| <input type="checkbox"/> HAZARDOUS PROCESS AND STORAGE (STATE & LOCAL)         |                     | 502-573-0382 |
| <input type="checkbox"/> FUEL TANK (STATE)                                     |                     | 502-573-0382 |

## Before you can legally occupy.....

### CHECKLIST OF POSSIBLE CERTIFICATES REQUIRED BEFORE LEGAL OCCUPANCY CAN BE ISSUED:

|   |                              |
|---|------------------------------|
| <input type="checkbox"/> Plumbing                                   | 502-573-0397                 |
| <input type="checkbox"/> Electrical                                 | 502-573-0382                 |
| <input type="checkbox"/> Sprinkler (Above ground and Underground)   | (From Installing Contractor) |
| <input type="checkbox"/> Fire Alarm                                 | (From Installing Contractor) |
| <input type="checkbox"/> Hazardous Process and Storage Approval     | 502-573-0382                 |
| <input type="checkbox"/> Flame spread Rating Report                 | (From Supplier)              |
| <input type="checkbox"/> Rangehood Extinguishing system Test/Report | (From Installing Contractor) |
| <input type="checkbox"/> Elevator Approval                          | 502-573-0382                 |
| <input type="checkbox"/> Boiler                                     | 502-573-0382                 |
| <input type="checkbox"/> Fuel Tank                                  | 502-573-0382                 |